

Division of Licensing and Protection
HC 2 South, 280 State Drive
Waterbury, VT 05671-2060
<http://www.dail.vermont.gov>
Survey and Certification Voice/TTY (802) 241-0480
Survey and Certification Fax (802) 241-0343
Survey and Certification Reporting Line: (888) 700-5330
To Report Adult Abuse: (800) 564-1612

June 29, 2016

Ms. Amy Quaglietta,
Pennington House
1822 North Ave
Burlington, VT 05408-1303

Dear Ms. Quaglietta:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on May 18, 2016. Please post this document in a prominent place in your facility.

We may follow-up to verify that substantial compliance has been achieved and maintained. If we find that your facility has failed to achieve or maintain substantial compliance, remedies may be imposed.

Sincerely,

Pamela M. Cota, RN
Licensing Chief

JUN 20 2016

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0607	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 05/18/2016
---	--	--	--

NAME OF PROVIDER OR SUPPLIER

PENNINGTON HOUSE

STREET ADDRESS, CITY, STATE, ZIP CODE

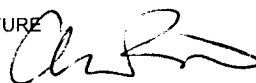
**1822 NORTH AVE
BURLINGTON, VT 05408**

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
R100	Initial Comments: An unannounced onsite re-licensing survey was completed by the Division of Licensing and Protection on 5/18/2016. The following regulatory issue was identified.	R100		
R302 SS=C	IX. PHYSICAL PLANT 9.11 Disaster and Emergency Preparedness 9.11.c Each home shall have in effect, and available to staff and residents, written copies of a plan for the protection of all persons in the event of fire and for the evacuation of the building when necessary. All staff shall be instructed periodically and kept informed of their duties under the plan. Fire drills shall be conducted on at least a quarterly basis and shall rotate times of day among morning, afternoon, evening, and night. The date and time of each drill and the names of participating staff members shall be documented. This REQUIREMENT is not met as evidenced by: Based on record review and staff interview, the home failed to rotate times of evacuation drills to include nights during the past year. Findings include: During review of the home's written records of timed, monthly evacuation drills from 4/15 through 4/16, evidence indicated that no drills had been conducted during the night shift (10 PM to 6 AM) or generally during the time period after 6 pm until 9:30 pm. At 2:30 pm on 5/18/16, the manager of the home confirmed that no evacuation drills had been conducted for the past	R302		

Please See Attached

Division of Licensing and Protection

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE



TITLE

Senior Manager

(X6) DATE

6-17-16

R302 - POC accepted 6/17/16 JHomer/RN/pmk

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0607	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____		(X3) DATE SURVEY COMPLETED 05/18/2016
NAME OF PROVIDER OR SUPPLIER PENNINGTON HOUSE		STREET ADDRESS, CITY, STATE, ZIP CODE 1822 NORTH AVE BURLINGTON, VT 05408		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	
	R302 Continued From page 1 year during the night timeframe.	R302		

JUN 20 2016



HOWARD
CENTER
Help is here.

Pamela M. Cota, RN
Licensing Chief
Division of Licensing and Protection
HC 2 South, 280 State Drive
Waterbury, VT 05671-2060

June 17, 2016

Dear Ms. Cota:

Listed below is the plan of correction for the deficiency cited in the re-licensing survey that was completed at Pennington House, 1822 North Ave RCH of HowardCenter Developmental Services on May 18, 2016.

R302 IX. Physical Plant

1. A fire drill was completed on May 25, 2016 between the hours of 10pm and 6am. To ensure that deficient practices do not recur the monthly safety check list has been updated with the correct times that all fire drills need to be performed throughout the year. Corrective action has been taken.

Please feel free to contact me with any questions or comments.

Sincerely,

Christine Rainville
Senior Leader, Pennington House
HowardCenter
102 South Winooski Ave
Burlington, VT 05401
488-6515
christiner@howardcenter.org

102 South Winooski Avenue, Burlington, VT 05401
T: 802.488.6500 | F: 802.488.6501

HowardCenter.org

Member Agency of United Way of Chittenden County